



Syracuse University

SAFE

**A COVID-19 Public Health & Emergency Response Framework
Supporting Reactivation of a Residential Campus**

Draft current as of June 10, 2020

EXECUTIVE SUMMARY

The Public Health and Emergency Management Subcommittee (the “Subcommittee”) was tasked to consider and offer recommendations relevant to health, safety and emergency management issues associated with planning to resume a residential campus at Syracuse University in the fall of 2020. Given that purpose, this report details the findings and recommendations of the Subcommittee.

Specifically, this report details 127 recommendations designed to promote individual and public health for a return to a residential campus experience in the fall of 2020. The Subcommittee’s recommendations are also designed to support an appropriate response on the part of the University if the campus were to experience a COVID-19 related health emergency after residential campus activities resume. The recommendations in this report are not intended to be all-inclusive. Each school, college, department and unit will tailor its plans, policies, procedures and operations based on its unique facts and circumstances, community and activities, as well as guidelines from federal, state and local governments and public health officials in effect at the start of, and throughout, the fall 2020 semester.

The Subcommittee’s recommendations prioritize the health, safety and well-being of students, faculty, staff and the Central New York community. Further, the Subcommittee acted purposefully to situate its recommendations within the context of current and anticipated public health guidance and policy directives advanced by governmental entities, including the U.S. Centers for Disease Control and Prevention (CDC), the New York State Governor, the New York State Department of Health and the Onondaga County Department of Health. The findings and recommendations contained within this report are informed by the unique expertise and experiences of Subcommittee members. Members of the Subcommittee include faculty, staff and administrators from across the campus community, with focused expertise and experience in the areas of public health practice, epidemiology, medicine, health promotion, law and emergency management.

The Subcommittee acknowledges that even in the face of robust planning and strict adherence to public health directives, it is unlikely the University can entirely mitigate the risk of student, faculty or staff exposure to the COVID-19 disease. That said, the recommendations detailed in this report, if enacted as part of an interconnected system of COVID-19 prevention, planning and preparedness protocols, serve to significantly reduce COVID-related risk to the campus and Central New York communities. For that reason, the Subcommittee concludes that—under deliberate, controlled and monitored conditions—it is reasonable to pursue a reactivation of a residential campus experience.

While the Subcommittee’s recommendations are intended to be considered together and as an interconnected system of COVID-19 preparedness protocols, not all are equal relative to impacting the efficacy of the University’s COVID-19 preparedness framework. Accordingly, the Subcommittee has identified 20 of this report’s recommendations as uniquely important relative to safeguarding individual

and public health, given the objective of resuming a residential campus in the fall of 2020. Those key strategic recommendations are as follows:

1. Syracuse University should consider a modified academic calendar that would eliminate the requirement that students return to campus following the Thanksgiving break.
2. Syracuse University should broadly screen the student population at the start of the semester, and again two weeks after the start of the semester, using pooled saliva polymerase chain reaction (PCR) screening. In addition, the University should implement regularly scheduled random samples of students, faculty and staff to monitor possible virus transmission.
3. Syracuse University should make the influenza vaccine mandatory for all students, faculty and staff who will reside or work on campus in the fall of 2020, subject to certain medical or religious exceptions.
4. Syracuse University should implement a residence hall wastewater COVID-19 surveillance program, as well as require students, faculty and staff to undergo regular temperature screening.
5. Syracuse University should implement a rapid diagnostic point of care test at a site (external to the Barnes Center) for testing any suspected infection of COVID-19.
6. Syracuse University should designate a facility and plan appropriately to isolate suspected or confirmed virus carriers.
7. Syracuse University should take the necessary steps to conduct contact tracing given evidence of a SARS-CoV-2 infection (the cause of COVID-19 virus) among a member of the campus community.
8. Syracuse University should create and implement a comprehensive health promotion communications effort, that includes physical and digital signage, social media posts and badges and regular campus notifications.
9. Syracuse University should require face masks or face coverings for all students, faculty, staff and visitors while on campus and in the presence of others, and in public settings where social distancing measures are difficult to maintain. In addition, hand sanitizing stations should be installed throughout campus, with an emphasis on classrooms, residence halls and higher-traffic public spaces.
10. The Code of Student Conduct and related policy documents and communications should clearly convey that compliance with University and government public health directives is an enforceable requirement to remain in good standing at Syracuse University. Further, Syracuse University should demonstrate an unwavering commitment to enforcing policies aimed at preventing the transmission of the SARS-CoV-2 virus.
11. Syracuse University should create and require an online educational seminar that will inform new and returning students about the health behaviors expected and required during the fall semester. This seminar should communicate social distancing norms, emphasize any

enforcement of rules around social distancing or other safety or hygiene measures, with considerations of perceptions of public safety and marginalized populations, particularly as it relates to parties, social events, etc.

12. Syracuse University should temporarily establish a COVID-19 public health advisory group, composed of representatives from the medical and public health professions, for the purpose of advising University leadership regarding any COVID-related contingencies impacting the fall 2020 semester and beyond (if required).
13. Syracuse University should limit the size of in-person meetings and classes based on the guidance from local, state and federal orders and guidelines, and generally not exceed 30 persons. Larger meetings may be considered in physical spaces where 6 feet of social distancing can be accommodated, and the number of participants should generally not exceed 50 percent of the room's stated capacity.
14. Syracuse University should establish a process, in addition to any existing disability accommodation process, to entertain requests for flexible working arrangements for faculty or staff with increased risk of severe illness given complications associated with COVID-19 disease, or over the age of 65.
15. Syracuse University should promote limitations on travel, as practical, for faculty, students and staff. Those individuals traveling away from Central New York should be subject to mandatory testing and/or possible quarantine before returning to campus.
16. Visitors and guests should generally be restricted from accessing residence halls and other campus facilities, unless as part of an official University tour, or approved in advance by the relevant dean, director or unit leader.
17. People with disabilities may face unique challenges related to the COVID-19 health emergency, and very specifically related to the resumption of residential academic life. Syracuse University should follow established processes to meet the needs of students, faculty and staff with disabilities.
18. Syracuse University should plan to make remote learning and working options available in the event that an increase in local infections necessitates continued physical distancing and to support vulnerable students and staff, students in quarantine or isolation and students and staff who cannot physically return to campus.
19. The University should develop a COVID-19-specific plan to maintain proactive and collaborative lines of communications with key government and community stakeholders.
20. Upon resuming a residential campus experience, Syracuse University should be prepared to provide necessary supports and service to all members of the University community in an inclusive and culturally competent manner.

Again, with some exceptions, the Subcommittee acted purposefully to avoid prescribing detailed procedures and protocols regarding the implementation of its recommendations. The Subcommittee recommends the schools, colleges and units develop detailed plans to enact this report's recommendations (in alignment with this master plan).

University leadership should also consider assigning an individual or committee to ensure alignment of these plans with Syracuse University's broader public health guidance. Further, the Subcommittee recommends the University create a comprehensive approach to providing both the strategic and operational data as well as analytics necessary to implement these recommendations. All relevant data should also be maintained and analyzed throughout the academic year in real time to ensure policies and protocols are effective and to mitigate health risks stemming from noncompliance.

Finally, the members of the Subcommittee appreciate the opportunity to contribute their expertise and experience to inform what we believe is a robust and appropriate system of policies and protocols supporting the objective of safely resuming residential campus life at Syracuse University. To that end, the Subcommittee recommends that the University consider this report as a "living document," and act to update and revise the findings and recommendations of the Subcommittee over time, as COVID-19 science, public health guidance and local conditions require. The members of the Subcommittee remain committed to continuing in their advisory role, as the University works toward the important objective of resuming residential campus life at Syracuse University.

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1. CHARTER & PURPOSE

The Public Health and Emergency Management Subcommittee was tasked to develop strategic recommendations supporting the objective of resuming a residential campus at Syracuse University (fall of 2020). Specifically, the Subcommittee was directed to offer recommendations and strategies consistent with best public health and emergency management practice, current and anticipated public sector policy guidance, and as appropriate for the Syracuse University campus setting.

Accordingly, this report details a broad-based public health and emergency response framework—and corresponding recommendations for action—that establishes and defines conditions to safely resume a residential campus experience at Syracuse University (August 2020). The Subcommittee's recommendations prioritize the health and well-being of students, faculty, staff and the community, address and anticipate relevant directives from governmental agencies, and identify new and existing resources that must be deployed in support of this effort. The Subcommittee's recommendations are intended to apply broadly to all campuswide operational activities, and assume planning related to classroom teaching, residential life, student experience activities and policies impacting employees and our community will be informed by the findings and recommendations detailed in this report.

2. SUBCOMMITTEE MEMBERSHIP

The members of the Public Health and Emergency Management Subcommittee are as follows:

- Mike Haynie (Subcommittee Chair, Vice Chancellor)
- George Athanas (Director, Residence Life)
- Tony Callisto (Senior Vice President for Safety and Chief Law Enforcement Officer)
- Carly Colbert (Le Moyne College Representative)
- Kathleen Coughlin (Director of Operations, Health and Wellness)
- Dan French (Senior Vice President and University Counsel)
- Andy Gordon (Senior Vice President and Chief Human Resources Officer)
- Mary Pat Grzymala (Senior Associate Director, Facilities Services)
- Chad D. Hendrick (Senior Associate Director, Facilities Services)
- Joe Hernon (Director, Emergency Management)
- Cydney Johnson (Executive Director, Government Relations)
- Brittany Kmush (Assistant Professor of Public Health, Falk College)
- David Larsen (Associate Professor of Public Health, Falk College)
- Jamie Mullin (Senior Associate Athletics Director)

- Diane Murphy (Dean, Falk College)
- Dr. Karen Nardella (Chief Medical Officer)
- Anthony Pagano (Manager, Facilities and Distribution Services)
- Kevin Quinn (Senior Advisor, Government Relations)
- Ramesh Raina (Professor of Biology, Interim Vice President of Research)
- Eileen Simmons (Director, Housing)
- Seth Tucker (Director, Global Safety and Support)
- Stephen Vassallo (Assistant Vice President, Institutional Research)
- Brittany Zaehring (Senior Associate Vice President, Enrollment and the Student Experience)

3. REPORT OVERVIEW & ORGANIZATION

The report leverages the unique expertise and relevant experiences of Subcommittee members—who include public health faculty and epidemiologists from Falk College, the dean of Falk College, Syracuse University’s medical director, medical and wellness professionals representing the Barnes Center at The Arch, and representatives from student life, facilities and other relevant departments across campus—for the purpose of defining policies and recommendations appropriate to promote the well-being of the Syracuse University and Central New York communities, given planning to resume a residential campus experience at Syracuse University (August 2020). This report is informed by the most current public health and scientific information available to the Subcommittee. The findings and recommendations detailed to in this report are intended to be considered together, as part of an interconnected system of policies and protocols positioned to advance a whole-of-the-University approach to COVID-19 prevention, planning and preparedness.

Importantly, this framework acknowledges that even in the face of robust planning and strict adherence to public health directives, it is unreasonable to assume the ability to entirely mitigate the risk of student, faculty or staff exposure to COVID-19. However, it is the carefully considered conclusion of the Subcommittee that—given deliberate, controlled and monitored conditions aligned with best public health practice—it is not unreasonable for Syracuse University to pursue a reactivation of a residential campus experience in August of 2020.

In what follows, we first present the planning assumptions, and then detail what the Subcommittee has determined to be conditions most important to resuming residential learning in the fall of 2020. We also present specific findings and recommendations relevant to promoting the well-being of Syracuse University students, staff, faculty and our community, in the context of the planning assumption that we will resume in-person instruction at Syracuse University.

Finally, it is important to make explicit that the Subcommittee did not extend its purpose to specifically defining and describing unit-level, operational protocols and procedures appropriate to implement the recommendations detailed in this report. Instead, the Subcommittee assumes and acknowledges that unit-level leaders, faculty and staff are best positioned to understand the specific implications (for their units) associated with implementing the recommendations detailed in this report. Therefore, in most instances, the Subcommittee acted with intent to avoid prescribing detailed procedures and protocols regarding unit-level implementation of its recommendations. Exceptions to this guiding principle include findings and recommendations related to COVID-19 testing, surveillance, isolation/quarantine procedures and clinical care issues for individuals who become infected by the SARS-CoV-2 virus.

It is the Subcommittee's recommendation, that following leadership review of this report—and specific decisions related to accepting, modifying or rejecting the policy recommendations of the Subcommittee—Syracuse University's schools, colleges and units should develop plans for unit-specific implementation (in alignment with this master plan), appropriate to the function and unique operations of individual units, and subject to what is possible or feasible, and meets their unique needs.

4. PLANNING ASSUMPTIONS

The following planning assumptions have informed this effort and report:

- a. Syracuse University intends to resume a residential campus experience, in some manner, in the fall of 2020.
- b. Syracuse University will be permitted—by relevant public health authorities—to resume a residential campus experience, in some manner, in the fall of 2020.
- c. Based on current enrollments and course registrations for fall 2020, students and parents generally support resumption of a residential campus in the fall of 2020.
- d. Syracuse University will have the lead time required to transition from remote work, in late spring/early summer of 2020, such that the faculty and staff necessary to prepare the campus to resume a residential campus experience are available to support this effort.
- e. COVID-19 will be present in our community, and in communities across the globe, in the fall of 2020.
- f. Syracuse University students, faculty and staff will not have access to a COVID-19 vaccine before fall 2020, nor will there be a widely available and highly effective treatment for COVID-19 disease.
- g. Upon resuming a residential campus experience, Syracuse University will be prepared to take reasonable and appropriate steps to promote the health and well-being of students, faculty, staff and our Central New York community. This includes (but is not limited to) a robust infrastructure to support COVID-19 testing, contact tracing, surveillance and isolation (where required and feasible).

- h. Upon resuming a residential campus experience, Syracuse University will be prepared to provide necessary supports and service to all members of the University community, in an inclusive and culturally competent manner.
- i. Upon resuming residential instruction, Syracuse University will be supported in its efforts by local, regional and state elected leaders and the Syracuse community.
- j. Upon resuming residential instruction, Syracuse University assumes and acknowledges that—even in the face of robust preparedness, planning, and adherence to public health directives—risk of student, faculty and staff exposure to COVID-19 cannot be mitigated entirely.
- k. Finally, acknowledging that the risk of exposure to COVID-19 cannot be mitigated entirely, no individual will be required to participate in a reactivated residential campus experience, and the University will be as flexible as reasonably possible in helping achieve continued academic progress for any student who chooses not to participate. The University will also be as flexible as reasonably practical with respect to faculty and staff member considerations regarding a reactivated campus experience.

5. NECESSARY CONDITIONS FOR A RESIDENTIAL CAMPUS

Given the planning assumptions detailed above—and the concomitant student, faculty, staff and community expectations associated with what it means to resume a residential experience at Syracuse University—the Subcommittee identified the following “conditions” as *central elements of any planning and preparedness strategy*, aligned with the objective of reactivating a residential campus in the fall of 2020:

- a. The transmission of COVID-19 is sufficiently controlled in Central New York, so as to support a safe reactivation of residential operations at Syracuse University. Based on best public health guidance, as applied to the Central New York region—and specifically in Onondaga County, this metric translates to 1) a sustained low and not significantly increasing rate of new infections and 2) a sustained low and not-increasing long-term rate of hospitalizations. In addition, New York State has outlined additional metrics that will be monitored by the New York State Department of Health, to determine the level of restriction required in Central New York. Those metrics are detailed at: NY Forward.
- b. Syracuse University—working with public-sector public health officials—can access an adequate supply (for the population) of viral diagnostic tests and the resources (financial and personnel) to administer those tests as a dimension of a broad-based COVID-19 screening and surveillance program.
- c. Syracuse University—working with public-sector public health officials—can confirm adequate capacity to conduct contact tracing and isolation of COVID-19 exposed and COVID-19 positive students and employees. This capacity could be sourced internally or sourced as a collaboration with the Onondaga County Department of Public Health (pending appropriate public-sector guidance).

- d. Syracuse University can confirm access and centrally resource an adequate, predictable and sustainable supply of personal protective equipment (PPE), appropriate to implement best public health practices and directives and the recommendations detailed in this report.
- e. Syracuse University has in place campuswide policies related to use of masks/face coverings, standards for physical distancing and physical density, sanitation and other related best public health guidelines as prescribed by New York State and the U.S. Centers for Disease Control and Prevention.
- f. Syracuse University can demonstrate a plan and adequate capacity to address cases of COVID-19 among students, particularly those whose illness requires advanced care and/or hospitalization.

Given assumptions and conditions detailed above, what follows are specific findings and recommendations identified by the Subcommittee, as broadly appropriate to promote the well-being of Syracuse University students, staff, faculty and our community, given the planning assumption that Syracuse University will resume a residential campus experience in the fall of 2020.

The findings and corresponding recommendations of the Subcommittee are organized based on key operational and policy categories relevant to the whole of campus. Again, with some exceptions, the Subcommittee acted with intent to avoid prescribing detailed procedures and protocols regarding unit-level implementation of the recommendations that follow. It is the position of the Subcommittee that Syracuse University's schools, colleges and units are best positioned to develop a plan for implementation and compliance appropriate to the function and operational responsibilities of individual divisions, units, schools and colleges.

6. PLANNING, PREPAREDNESS & RESPONSE

In what follows, we detail findings and recommendations relevant to COVID-19 planning, preparedness and response on the part of Syracuse University's residential campus, given the assumption that COVID-19 will be present in this community, and in communities across the globe, in the fall of 2020. The recommendations and prescriptions detailed below are generally applicable to all segments of our campus community, but in some cases are considered uniquely for students, faculty and staff, given the idiosyncratic activities and circumstances characteristic of a residential academic enterprise.

A. HEALTH PROMOTION

Findings

1. A robust communications effort focused on healthy behaviors while on campus will support proactive prevention and transmission of the virus. This includes communications regarding specific protections for students, faculty and staff who have predisposed medical risk.
2. People with disabilities may face unique challenges related to the COVID-19 health emergency, and very specifically related to the resumption of residential academic life.

3. Promoting social distancing during University activities (teaching, dining, extracurricular activities, etc.), including facilities modifications where appropriate, is an effective method of prevention and mitigation.
4. Promoting proactive steps to mitigate the potential for confounding illness in the campus population—such as influenza—will support early COVID-19 diagnosis and treatment.

Recommendations

1. Syracuse University should create and implement a comprehensive health promotion communications effort, that includes physical and digital signage, social media posts and badges and regular campus notifications.
2. Syracuse University should ensure that signage and messaging comply with accessibility standards and best practices, and that health promotion communications are designed and shared in a way that is accessible to the blind and visually impaired.
3. Health promotion communications should leverage a “social media norms campaign,” potentially developed with the input of students and employees.
4. Syracuse University should create and distribute branded promotional items for students, employees, and visitors that describe and promote healthy behaviors (e.g. hand sanitizer stations that include reminders about social distancing, face coverings, water bottles, etc.).
5. Syracuse University should create and require an online educational seminar that will inform new and returning students about the health behaviors expected and required during the fall semester. This seminar should communicate social distancing/physical distancing norms, emphasize any enforcement of rules around social distancing with considerations of perceptions of public safety and marginalized populations, particularly as it relates to parties, social events, etc.
6. Syracuse University should make the influenza vaccine mandatory for all students, faculty and staff, subject to medical or religious exemptions, and develop and implement a communications campaign to advance the influenza vaccination as a social norm and strategy to expedite diagnosis of the COVID-19 disease.
7. In the context of a health promotion strategy, special considerations for outreach may include the following areas and populations:
 - Alcohol and other substance considerations
 - Student athletes
 - Fraternities and sororities
 - International students
 - People with disabilities

- Under-represented populations and communities
- Issues related to: Off-campus living
- Issues related to: Sexual health
- Issues related to: Mental health and resiliency
- Issues related to: Bias and discrimination

B. SCREENING, TESTING, TRACING & SURVEILLANCE

Findings

1. Capacity for immediate viral testing of all symptomatic students, faculty and staff—including the ability to rapidly test contacts and isolate infected individuals— is critical to the ability to resume residential activities in fall 2020.
2. A plan for surveillance virus testing and symptom surveillance should be in place that readily detects the emergence and spread of infection.
3. A testing process must be identified for faculty, staff and students, that includes both an initial screening for infection prior to return to campus and ongoing monitoring throughout the fall semester.
4. A contact tracing plan is central to controlling the spread of the SARS-CoV-2 infection on campus.
5. A critical component of any contact tracing plan is the ability to contact quickly and directly (by phone or text) students, faculty and staff.
6. Metrics and a framework to detect any surge of infection on campus, and a shared understanding of the conditions that would require interruption or a shutdown of residential instruction, must be established.

Recommendations

1. Syracuse University should plan to screen the entire student population at the start of the fall semester, and again two weeks after the return to campus, using pooled saliva PCR or other reasonably effective methods. A positive initial screening test should lead to isolation, followed by a negative diagnostic test before resuming regular campus access.
2. Syracuse University should pursue a random sample of students, faculty and staff at the start of the semester to obtain a baseline seroprevalence estimate of the campus community.
3. Syracuse University should enact a plan to routinely screen each residence hall utilizing freedom from disease sampling to ensure no transmission among residents. If a residence hall fails the freedom from disease sampling procedure, all residents should be tested for a SARS-CoV-2 infection.

4. Syracuse University should require all students, faculty and staff undergo regular temperature screening. If a fever is detected, the individual should be directed to receive a SARS-CoV-2 infection test prior to engaging in campus-based activities.
5. Syracuse University should establish regularly scheduled random surveys of students, faculty and staff to monitor seroprevalence.
6. Syracuse University should conduct wastewater surveillance for residence halls and other selected buildings at regular intervals. Other environmental surveillance strategies should be considered as the science advances. All surveillance data will be coordinated with Onondaga County Health Department to understand transmission dynamics in the county and within Syracuse University. An increasing trend in environmental surveillance would trigger freedom from disease sampling of affected residence halls.
7. Syracuse University should establish rapid diagnostic point-of-care testing capabilities, at a site external to the Barnes Center, available for testing any suspected infection of SARS-CoV-2. Students, faculty and staff may seek or obtain COVID-19 testing from another location or primary care provider. If at any time a student, faculty or staff tests positive for COVID-19 they should notify the appropriate Syracuse University entity/representative.
8. Syracuse University should maintain a record of positive COVID-19 test results that can be coordinated with the county and state COVID-19 databases. Coordination will allow for notification, required by law, of any Syracuse University student, faculty or staff who tests positive for COVID-19. Data privacy concerns should be accounted for in this process.
9. Syracuse University should establish a contact tracing plan in response to positive SARS-CoV-2 infection tests. Contacts identified by qualified contract tracers should be traced including classmates, co-workers, club affiliates, social acquaintances and house/floor mates. All contacts should be directed to self-quarantine based on the standard recommended by health officials in place at the time, or based on a modified campus quarantine procedure if approved by New York State.
 - a. A critical component of this plan is the ability to contact quickly and directly (by phone or text) students, faculty and staff. Therefore, at the start of the semester, all Syracuse University students should be required to register and/or update their personal cell phone (or alternative contact information) with the Barnes Center.
 - b. It is important that the plan for contact tracing acknowledges the broad diversity represented by the campus community, therefore contact tracing should proceed in an inclusive and culturally competent manner.

10. Syracuse University should consider suspending certain (high-density) recreational/fitness areas of the Barnes Center until surveillance information has been received. An absence of on-campus transmission could lead to reopening these facilities.
11. Syracuse University should require that individuals traveling to high-risk locations, away from Central New York, be subject to testing and/or possible quarantine before returning to campus.

C. CONTAINMENT, ISOLATION & QUARANTINE

Findings

1. Definitions (U.S. Centers for Disease Control and Prevention):
 - a. Isolation: An action to separate sick people with a contagious disease from people who are not sick.
 - b. Quarantine: An action to separate and restrict the movement of people who were exposed to a contagious disease to see if they become sick. These people may have been exposed to a disease and do not know it, or they may have the disease but do not show symptoms.
2. Preventing the spread of COVID-19 disease depends, in part, on isolating infected individuals, and quarantining those possibly exposed to the virus that causes COVID-19 disease.
3. It is critical to identify facilities appropriate to quickly isolate/quarantine suspected or confirmed virus carriers.
4. Related to the above, students in isolation or quarantine face unique challenges that must be acknowledged and proactively addressed.

Recommendations

1. Syracuse University should take action to create capacity for isolation and quarantine housing for students, to include students living off-campus (if necessary and feasible).
2. Syracuse University should develop isolation plans for students who test positive for COVID-19, consistent with CDC and other guidelines.
3. Syracuse University should provide transportation to designated isolation and quarantine spaces. The student should be assigned a case manager to assist in academic and other support coordination. Food and other necessities should be provided.
4. Syracuse University should ensure that isolation and quarantine rooms are physically separated from other residential student rooms.
5. Syracuse University should ensure that quarantine rooms have private bathroom facilities and are stocked with a thermometer, sanitizing wipes, tissues, soap, hand sanitizer and toiletries.
6. Syracuse University should ensure that counseling services and/or Hendricks Chapel be available remotely to students in isolation or quarantine as needed.

7. Syracuse University should ensure that all students placed in isolation or quarantine will have their ID cards annotated to enforce isolation or quarantine requirements. Any violation of their isolation or quarantine order will result in a referral to the student conduct process.
8. Syracuse University should have a Barnes Center nurse call the student in isolation daily to monitor symptoms. If symptoms progress, the student may be transported for reevaluation at the Barnes Center or a local hospital depending on severity and time of day.
9. Syracuse University should require that a Barnes Center medical provider be available at all times to address any changes to health status experienced by an isolated student.
10. Syracuse University should require staff and faculty members who are symptomatic or asymptomatic (but test positive while at work) be sent home and directed to contact their primary care provider. Departments should collaborate with Human Resources to provide adequate support and care for that employee.
11. Syracuse University should adopt appropriate policies to ensure that faculty and staff who test positive (or are exposed to someone who tests positive) are able to quarantine or self-quarantine without concern for financial hardship.
12. Syracuse University contact tracers should, consistent with contact tracing standards, locate close contacts of all COVID-positive students and employees, and for students, arranging isolation/quarantine at the location prearranged by Syracuse University. All close contacts should be tested for COVID. Quarantine should last for 14 days, unless a modified campus quarantine procedure is approved by New York State.
13. To the degree reasonably feasible, isolated and quarantined students should be encouraged to continue academic activities remotely or be provided with note-takers. Syracuse University should implement appropriate policies to accommodate excused absences for isolated students.

D. TREATMENT & CARE OF COVID-INFECTED INDIVIDUALS

Findings

1. It is critical to establish an accessible health care response system to advise individuals who develop COVID-19 symptoms, or fear exposure to the virus.
2. All students who are symptomatic or suspect they are or will become symptomatic must have a clear line of communication with Barnes Center medical providers.
3. It is important that the health care response system allows for care by the Barnes Center staff, while also allowing other students to use the facility without risk.
4. Some complications related to COVID-19 disease may require a level of care that exceeds the capabilities of the Barnes Center.

Recommendations

1. Syracuse University should encourage—and create an accessible system—for students with any illness to notify the Barnes Center.
2. Syracuse University should assign a triage nurse or medical provider to speak with any (by phone or zoom) if they disclose any symptoms consistent with COVID.
3. Syracuse University should establish, for those who disclose any symptoms consistent with COVID-19, a testing site external to the Barnes Center and require testing before a student comes to the Barnes Center for further evaluation. Suspected COVID-19 cases should be tested with rapid PCR testing or other reasonably effective testing mechanisms.
4. Syracuse University should, until further notice, disallow walk-in appointments at the Barnes Center as a strategy to reduce possible exposure to the virus.
5. Syracuse University should require any student who visits the Barnes Center should to wear face masks/coverings.
6. Syracuse University should ensure procedures meet CDC guidelines for cleaning exam rooms following each patient visit if a student is found to be COVID-positive following a rapid test. Providers should wear full PPE for all COVID-related visits.
7. Syracuse University should take additional precautions throughout the Barnes Center to reduce possible transmission.
8. Precautions taken should include division of waiting room into well visit and sick visit sections, regular cleaning of common areas, splitting of schedule to place well visits earlier in the day and sick visits later in the day.
9. Syracuse University should refer COVID-19-positive students to necessary campus support services with a special emphasis on mental health supports.
10. Syracuse University should explore a formal relationship with a local hospital, to streamline access to advanced care for students who experience complications from COVID-19 disease that require clinical care beyond the capabilities of the Barnes Center.

E. PERSONAL PROTECTIVE EQUIPMENT (PPE)

Findings

1. Personal protective equipment, particularly masks, face coverings, gloves and sanitization products is an effective prevention tool.
2. Appropriate use of face masks or alternative face coverings can minimize risks associated with the exposure to COVID-19.
3. The virus can be transmitted via asymptomatic individuals.

4. Broad access to (and use of) sanitation products for students, faculty and staff is important as a proactive strategy to prevent virus transmission, particularly in classrooms, residence halls and public spaces.
5. The above is particularly critical for individuals with personal risk factors. According to the CDC, certain people, including older adults and those with underlying conditions, such as heart or lung disease or diabetes, are at higher risk for developing more serious complications from COVID-19.
6. The supply chain associated with PPE has been unstable throughout the COVID-19 health emergency and, for certain items, may remain so for the foreseeable future.

Recommendations

1. Face masks or face coverings should be required by all students, faculty, staff and visitors while on campus and in the presence of others, and in public settings where other social distancing measures are difficult to maintain (e.g., common work spaces, meeting rooms, classrooms, etc.).
2. Syracuse University should provide an initial supply of washable/reusable high-quality cloth masks to faculty, staff and students.
3. Hand sanitizing stations should be installed throughout campus, with an emphasis on classrooms, residence halls, dining halls, recreation facilities and public spaces.
4. Syracuse University should develop and implement a focused procurement strategy to ensure a robust and reliable supply of PPE. This strategy should incorporate population data inclusive of faculty, staff and visitors and assume full residential operations. Further, this strategy should endeavor to source and secure a PPE inventory appropriate for a “rolling” 12-month period. That is, at any given time, Syracuse University has in inventory or on order, PPE appropriate to supply the campus community for a 12-month period.
5. The University’s research mission may dictate unique requirements related to PPE. The Vice President for Research should immediately initiate a campuswide survey of research-specific PPE requirements, and coordinate procurement as a dimension of the recommendation above.

F. GENERAL FACILITIES CONSIDERATIONS

Findings

1. Issues related to the general capacity, configuration and capability of University facilities to support social distancing and density practices represent an important factor impacting the likelihood of virus transmission between otherwise disconnected populations on campus and in the community.
2. In addition, managing access and entry to buildings and other facilities represents an important mechanism to reduce the likelihood of virus transmission between otherwise disconnected populations on campus and in the community.
3. Reducing density where possible for classrooms, dining halls, gathering spaces, hallways and entrances to buildings has been shown to reduce the likelihood of virus transmission.

4. Specifically for residential living, enhanced cleaning, social distancing, requiring personal face coverings in common areas, restrictions on group events and activities and limited cross-access by residential facilities has been shown to reduce the likelihood of virus transmission.

Recommendations

1. Syracuse University should act to configure facilities—to the maximum extent practical—to support public health practices and behaviors identified as reducing the risk associated with virus transmission. These include, but are not limited to, the following:
 - a. Configure work and public space to allow for least 6 feet between individuals.
 - b. In some limited situations, in workspaces where people must face each other and are unable to be 6 feet apart, consider installation of a protective barrier. Examples might include commonly visited areas such as reception desks and check-in points.
 - c. Place appropriate wayfinding signage at entrances indicating how to proceed (avoid unnecessary wandering, congregating or human-to-human direction seeking).
 - d. Use “airport-style” ropes or other barriers to distance people in high-traffic waiting rooms and at desks and kiosks.
 - e. Remove chairs and desks to ensure proper physical distancing in conference and waiting rooms.
 - f. Identify allowable occupancy to control workflow and/or establish maximum attendance.
 - g. Make face coverings available for purchase throughout campus (e.g., at the bookstore, pharmacy, etc.).
 - h. Post maximum occupancy in common break areas and configure to accommodate appropriate physical distancing.
 - i. Provide sanitizing supplies for individuals to clean their areas before and after use.
 - j. Eliminate reusable kitchen items (flatware, dishes, cups) and cleaning tools (sponges, brushes, towels) and replace with single-use options. Consider eliminating common touch dispensers and appliances in dining centers, break rooms, kitchenettes, etc. Reconsider use of vending machines moving forward.
 - k. Remove high-touch items such as magazines, common pens, etc.
 - l. Provide hand sanitizer at all entrances and high-traffic areas.
 - m. Identify frequently touched areas (doors, cabinets, etc.) and investigate options to implement no/reduced touch options such as door removal, card access, foot-operated door pulls/pedals or sensor-triggered doors.
2. Syracuse University should require a valid identification card for entry to all buildings, and not permit any individual to hold or prop open exterior doors for any other person.

3. Departments and building coordinators should identify usable building access points and coordinate arrival and departure times of faculty and staff to reduce congestion during typical “rush hours” of the business day.
4. Departments and building coordinators should consider temperature screening opportunities at access points, including Bird Library and dormitories, to monitor the temperature of faculty, staff and students.
5. Visitors, guests and animals (with the exception of approved service animals) should not be allowed access to Syracuse University buildings or facilities, without prior approval from the relevant dean, director or unit leader. Exceptions may be allowed, under certain conditions, for official University events such as campus tours, etc.
6. Syracuse University should consider appropriate housing density standards for students.

G. EMERGENCY PREPAREDNESS & RESPONSE

Findings

1. A robust emergency management and response capability, situated specifically to address COVID-related contingencies, will help contain any outbreak.
2. Emergency preparedness education for all members of the University community, prior, to and during the fall semester, is an important tool to reduce transmission of, or respond appropriately to, COVID-19.
3. In the context of leadership decision-making regarding a COVID-19 related emergency, it is critical the University leaders can readily access and leverage subject matter experts on campus and in government.
4. A whole-of-community approach to emergency preparedness will contribute to prevention and response efforts.

Recommendations

1. Syracuse University should establish, within the existing Emergency Management Plan and infrastructure, a specific COVID-19 emergency response team. This team should include (but not necessarily be limited to) representatives from emergency operations, the Barnes Center, Student Experience, DPS, Communications and the University Medical Director.
2. Syracuse University should temporarily establish a COVID-19 public health advisory group, composed of faculty experts and representatives from the medical and public health professions, for the purpose of advising University leadership regarding any COVID-related contingencies impacting the fall 2020 semester and beyond.
3. Syracuse University should require return to campus training to explain basic emergency preparedness operations to students, faculty and staff. Aligned with a health promotion strategy

led by the Barnes Center, the implementation of a basic emergency preparedness orientation (BEPO) will provide situational awareness for all University community members. This education will reemphasize the well-known risks of the COVID-19 pandemic and reiterate best practices for how individuals can do their part to be safe and prepared.

7. SPECIAL POLICY CONSIDERATIONS

A. MEETINGS & EVENTS

Finding

1. Convening in groups increases the risk of viral transmission.

Recommendations

1. Where feasible, meetings should be held in whole or in part using the extensive range of available collaboration tools (e.g. Zoom, WebEx, Microsoft Teams, Skype, telephone, etc.).
2. In-person meetings should be limited in accordance with restrictions of local, state and federal orders, and generally should not exceed 50 percent of a room's capacity (assuming individuals can maintain 6 feet of separation).
3. In-person public events and lectures are discouraged. Approval to host a public event or lecture should be required from the relevant dean or vice president.
4. Departments should remove or rearrange chairs and tables or add visual cue marks in meeting rooms to support social distancing practices between meeting attendees.

B. STUDENT BEHAVIOR & CODE OF CONDUCT

Findings

1. The degree to which students on and off campus comply with or disregard public health guidance and social distancing requirements will greatly impact the potential transmission of COVID in Syracuse during the fall semester.
2. Clearly communicating health and safety directives to students, and consequences for violating those directives, will help ensure compliance with all safety, prevention and response measures.
3. The most significant community-connected concern related to reactivation of a residential campus, is uncertainty associated with student behavior and conduct that could put others at risk.

Recommendations

1. The Code of Student Conduct (the “Code”) requires students to follow the directives of University officials. As such, the Code currently authorizes the University public health directives as enforceable requirements to remain in good standing. This aspect of the Code should be reemphasized with students as part of the University’s communications plan.
2. The Office of Student Rights and Responsibilities should develop plans to expeditiously perform student conduct investigations, informal resolution meetings and formal hearings through video/ audio conference related to violations of public health guidance.
3. The Office of Student Rights and Responsibilities should issue periodic messages focused at students both on and off campus to reinforce that the Code requires compliance with all government/law enforcement/University directives regarding COVID-19 social distancing.

C. STUDENT, FACULTY & STAFF TRAVEL

Findings

1. Travel by students and employees to and from the Syracuse, New York, campus during the fall semester will pose an increased risk of COVID-19 exposure, contraction and transmission.
2. Accordingly, travel away from campus during the fall semester should be limited as much as practicable. For those students and employees who do travel away from campus, temperature screening and COVID-19 testing prior to travel would be beneficial.
3. University-sponsored international air travel, to any CDC Level-3 destination, represents considerable risk to the campus community.
4. Modification of travel policies should be ongoing given new information, clearly articulated as appropriate to Central New York, and aligned with relevant public-sector policy guidance.
5. Campus reentry for those traveling on University-business should be coordinated with the overall COVID-19 surveillance plan.

Recommendations

1. Student travel away from campus during the fall semester should be discouraged as much as practically possible. Recommended actions include:
 - a. Implement an accelerated academic calendar, that would negate the requirement that students return to campus following the Thanksgiving break.
 - b. Consistent with the above, reconfigure the academic calendar and consider scheduling Friday and/or weekend classes.
 - c. Require that co-curricular or extracurricular travel for the fall be approved by the relevant dean or vice president. All student travel for University purposes should be registered.

- d. In the context of all the above, reasonable accommodations and exceptions should be provided for personal/medical/family emergencies.
2. All personal travel for students and employees should be discouraged. Anyone who does travel should be directed to adhere to any return-to-campus protocols in place at the time of travel.
3. Faculty and staff travel away from the Central New York region should be strongly discouraged, except where a critical academic or business need requires:
 - a. University-sponsored travel to any country specifically designated with a CDC Level-3 advisory should remain prohibited until further notice.
 - b. All faculty and staff international travel, during the fall semester, should require the approval of the relevant dean or unit leader. The faculty or staff member must demonstrate a critical academic or business purpose supporting why the travel cannot be delayed and/or the reason the purpose for the travel cannot be accomplished via other means. Registration of all international travel by faculty and staff is required per existing travel safety policy.
 - c. Faculty and staff traveling domestically by common carrier on nonessential University business should remain prohibited. Extreme caution is urged for all personal domestic travel by common carrier.
 - d. Reasonable accommodations and exceptions should be provided for personal/medical/family emergencies, and for essential academic or business purposes.

D. POLICY ON CAMPUS VISITORS

Findings

1. Visitors to campus from areas outside of Central New York pose a risk of virus transmission to the University community. Accordingly, reasonable limitations should be imposed on campus visitors.
2. Modification of visitor and contractor policies should be clearly articulated as appropriate to Central New York, and visitor access to campus should be coordinated with the overall surveillance plan.

Recommendations

1. Generally speaking, permissible visitors to campus should be limited to current and prospective students, University employees, parents and families during move periods, designated vendors and service operators, and ride-hailing and food delivery drivers.
2. Visitors and guests should generally be restricted from accessing dormitory buildings and other campus facilities, unless as part of an official University tour, etc. or approved in advance by the relevant dean, director or unit leader.

3. Syracuse University should require that, to greatest extent practicable, schools/colleges/units utilize virtual meetings and events rather than invite outside visitors and guests to campus during the fall semester.
4. Syracuse University should prohibit faculty and staff from bringing their children or family members to campus, unless for University-provided childcare services or for another bona fide reason approved in advance by the appropriate dean, director or unit leader.
5. Any campus visitor or contractor who has traveled internationally within the past 14 days must agree to be tested for SARS-CoV-2 prior to engaging in campus activities, or self-isolate for a total of 14 days before access to campus is authorized.
6. Schools, colleges, and units should be required to maintain a list of all nonroutine visitors with name and contact information to facilitate any potential contact tracing.

E. ON-CAMPUS & PUBLIC TRANSPORTATION (LOCAL)

Findings

1. Without proper precautions, group transportation can enhance the risk of exposure and transmission between individuals and between otherwise disconnected populations on campus and in the community.
2. It is particularly difficult to practice, social distancing when utilizing the Syracuse University Trolley, or on public transportation.

Recommendations

1. Hand sanitizer should be available in every Syracuse University transportation vehicle, or other means of group transportation provided or sponsored by Syracuse University. Such vehicles should be subject to a regular surface disinfecting schedule.
2. Maximum passenger counts for the Syracuse University Trolley and other transportation vehicles should be established to allow for appropriate social distancing.
3. All employees assigned to drive the Syracuse University Trolley, or other means of group transportation provided or sponsored by Syracuse University, should wear a mask at all times throughout their shift.
4. All passengers utilizing the SU Trolley, or other means of group transportation provided or sponsored by Syracuse University, should utilize a mask or alternative face covering before entering the bus/vehicle and avoid touching surfaces with your hands.
5. Upon disembarking the SU Trolley, or other means of group transportation provided or sponsored by Syracuse University, passengers should wash their hands or use hand sanitizer with at least 60 percent alcohol as soon as possible (and before removing mask).

F. IMPLICATIONS FOR REMOTE LOCATIONS

Findings

1. Conditions in locations remote from main campus may be very different than those local to Syracuse.
2. Government requirements for operating in remote locations may be different than those present in New York State and Onondaga County.
3. Local health infrastructure must be capable of supporting treatment needs to operate a remote program.
4. Decisions to operate academic programs in remote locations should be made on a case-by-case basis with reference to local requirements and standards established for the operation of main campus.
5. Programs should not operate in areas where restrictions are such that programs may not reasonably proceed in a residential model and/or the risk of infection may not be reasonably mitigated.
6. Personnel resources in remote locations that operate must be sufficient to support the needs of participants given the current environment.

Recommendations

1. Syracuse University programs in remote locations should discern the requirements for operating educational programs in the particular jurisdiction.
2. Syracuse University should develop an operational plan for each remote location which details the programs compliance with local regulations and University standards.
3. Each Syracuse University remote location should “apply” to operate during the fall semester by submitting operational plans and documentation of local regulations to University leadership.
4. Syracuse University should ensure that any decision to operate a program remotely should be informed by local liability considerations and reviewed by general counsel.
5. Syracuse University should consider whether the program calendar for remote locations should be adjusted consistent with that of main campus.
6. Syracuse University should take steps to minimize movement of participants away from the program site to mitigate the risk of exposure posed by extracurricular travel.
7. Syracuse University should monitor local conditions on an ongoing basis.
8. Syracuse University should adopt any formal Conditions of Participation necessary to establish the expectation that students must comply with local COVID-19 requirements and that failure to do so will be adjudicated as a conduct violation.
9. Syracuse University should routinely provide health guidance to participants that is consistent with local practice and CDC guidelines.

10. Syracuse University should require that students that pursue study at a remote location may not return to main campus during the course of the semester without a period of self-quarantine and/or having tested negative for COVID-19 following their return.

G. IMPLICATIONS FOR PEOPLE WITH DISABILITIES

Findings

1. People with disabilities are valued members of the Syracuse University community.
2. People with disabilities may face unique challenges related to the COVID-19 health emergency, and very specifically related to the resumption of residential academic life.
3. The Syracuse University Disability Community Group and its faculty, student and staff allies provided input to the Public Health and Emergency Management Subcommittee
4. The input of the Syracuse University Disability Community Group should be considered as expert testimony and incorporated in the Subcommittee's recommendations, as appropriate to acknowledge and address the unique challenges related to the COVID-19 health emergency facing people with disabilities.

Recommendations

1. Syracuse University should follow established processes for providing reasonable accommodations to students and employees with disabilities.
2. Syracuse University should also consider additional adjustments or support for students and employees with health concerns that may not rise to the level of a disability as defined by law.
3. Syracuse University's COVID-related communications, including signage and messaging, should adhere to accessibility standards. Health promotion communications should be designed to be accessible to the blind and visually impaired.
4. Given any plan to reconfigure access to campus buildings and facilities, Syracuse University should ensure accessible entrances and exits are maintained.

8. FACULTY & STAFF SPECIFIC CONSIDERATIONS

Findings

1. From a public health perspective, some faculty and staff may face unique challenges related to reactivation of a residential campus experience in the fall of 2020.
2. Any plan to resume a residential campus experience must uniformly incorporate policies, safeguards and protections prioritizing the health, safety and well-being of the University's entire employee population.

Recommendations

1. Syracuse University should provide all faculty and staff with a supply of face masks or coverings which shall be worn at all times when on University property, unless the faculty or staff can be socially distanced from any other faculty, staff, student or visitor to campus. It is the responsibility of every faculty and staff to ensure appropriate socially distanced practices.
2. Faculty and staff should be informed as to regular personal cleaning protocols for their workspace and personal areas, which should include wipe down and sanitizing computer, keyboard, mouse, desk, lab bench, phone, chair, etc.
3. Syracuse University should centrally resource and provide sufficient cleaning materials for faculty and staff to perform personal cleaning of their workspace and personal areas.
4. Syracuse University should establish a process to consider remote working requests from all staff who can continue to maintain productivity and are not required to have in-person contact with other faculty, staff or students.
5. Syracuse University will ensure that faculty and staff who are required to (or ordinarily) meet with or directly support students can do so in a manner consistent with public health guidance including use of face mask or covering, maintaining social distancing etc.
6. Each school, college or unit leader should be responsible to develop a plan to ensure that faculty and staff can adhere to social distancing recommendations. These plans may include staggered work schedules, alternating shifts, use of remote working arrangements and use of virtual meeting technology. The plans should be reviewed with the Office of Human Resources.
7. Faculty and staff who receive a positive test for COVID, regardless of whether the test is performed on campus or through a private medical provider, should confidentially report the test to the Office of Human Resources. The Office of Human Resources should adopt appropriate policies and practices for reporting test results, available leave, quarantine and return to work.

9. STUDENT-SPECIFIC CONSIDERATIONS

A. IMPLICATIONS FOR TEACHING & LEARNING

Findings

1. The COVID-19 health emergency presents unique challenge for the learning/classroom environment.
2. The high touch, highly interactive, and densely populated learning environment typical of Syracuse University is an exemplar of a congregate setting with multiple risk factors for ready transmission of COVID-19.

3. Accordingly, meticulous adherence to public health practices, including hand hygiene, physical distancing, proper cough/sneeze etiquette, frequent disinfection of common and high traffic areas, symptom assessment, temperature checks and face covering is critical across the learning environment.
4. The academic enterprise must deploy and commit to primary public health controls to slow the transmission associated with COVID-19.

Recommendations

1. Syracuse University should prioritize in-person instruction for courses with academic outcomes that cannot be measured or achieved virtually, such as performance, laboratory and clinical experiences.
2. Syracuse University should make remote options available in the event that a rebound in local infections necessitates continued physical distancing and to support vulnerable students and staff, students in quarantine or isolation and students and staff who cannot physically return to campus.
3. Syracuse University should consider limiting the number of attendees for in-person courses/sections. In most cases, all in-person courses/sections should be limited to fewer than 30 participants and utilize other physical distancing measures. Consider creating multiple sections/shifts to reduce numbers.
4. Syracuse University should consider hybrid instructional models whereby courses with lecture and discussion or lab sections have some or all the lecture portions offered digitally.
5. Syracuse University should implement close monitoring and tracking of in-person attendance and seating arrangements to facilitate contact tracing in the event of an exposure.
6. Syracuse University should develop a physical distancing plan for each course that includes:
 - a. Number of students and faculty present in each session.
 - b. Length of session.
 - c. Nature of activities.
 - d. Mechanisms to conduct student and faculty symptom checks.
 - e. Public health practices: face coverings, 6 feet of physical distancing, cough/sneeze etiquette, hand hygiene.
 - f. Provisions for hand sanitizer and enhanced cleaning.
 - g. Instructions to participants on the course-specific physical distancing protocol.
 - h. Availability of remote options.
7. Syracuse University should develop specialized plans for students who are at increased risk due to the occupational nature of their studies. Examples, include health professional students and students engaged in out-of-classroom or community-based instruction. In those instances,

the University should ensure students are provided with adequate PPE, supervision, and other protections based on their risk.

8. Syracuse University should develop specialized plans for courses and instruction that do not permit physical distancing and/or involve activities of higher risk. Examples include dance, theater and performing arts.
9. Syracuse University should develop attendance and excuse policies that acknowledge and support students who become ill without creating barriers and without requiring unnecessary visits to health facilities for documentation of illness. Given that each class will have a digital version, appropriate mechanisms should be developed and included in every published curriculum regarding attendance in either the in-person or digital class.
10. Syracuse University should encourage faculty-student communication regarding health status and any changes in their ability to complete coursework and academic responsibilities.
11. Syracuse University should identify resources for students with learning disabilities or difficulties with remote learning platforms.

B. INTERNATIONAL STUDENTS

Findings

1. Due to the fact that U.S. consulates are closed in many parts of the world, particularly in China, and given the significant limitations in international air travel, there is a strong likelihood that many international students will not be able to return to campus by the beginning of the fall semester. In fact, admitted first-year students who are Chinese nationals are currently being given visa interview dates in mid-October, confirming this assertion. International students in graduate programs will be similarly challenged.
2. There are many government policymakers openly talking about limiting visas and eliminating Optional Practical Training (OPT), which could have profound impacts on the availability and value proposition of U.S. higher education to international students.
3. International juniors and seniors and graduate students tend to congregate in housing and extracurricular activities, making them susceptible to incidents and targeting due to prevailing political attitudes towards China or racial/cultural bias.

Recommendations

1. Syracuse University should make a digital version of each class offering available to accommodate the cohort of international students who cannot be present on campus. For those classes utilizing lecture capture, they must be recorded and provided as asynchronous content to accommodate the time differences.

2. The University should include public health information and planning at Syracuse University in any public statements or advocacy efforts related to visas and OPT impacting international students.
3. Currently, the CDC requires international students traveling to the U.S. to engage in a 14-day quarantine. If that requirement remains in effect in the fall, Syracuse University should be prepared to support those quarantined students.
4. The University must be particularly aware of bias incidents towards its international student body. This may be heightened should there be an outbreak in the international student population. The University should be ready to provide specific support to students who suffer from any such bias incidents.

10. GOVERNMENT COLLABORATION & COORDINATION

Findings

1. Syracuse University must routinely communicate and coordinate closely with local, state, and federal elected officials (and staff) during this uncertain and challenging time for our University, region and state.
2. Coordination with government entities and public health agencies, particularly at the state and county level, is critical given the importance of public sector guidance and approvals required for the resumption of residential activities on campus.
3. Close coordination between New York State, the local health department and Syracuse University is a necessary condition for safe reactivation of a residential campus.

Recommendations

1. The University should develop a COVID-19-specific plan to maintain proactive and collaborative lines of communications with key government stakeholders, with attention paid to New York State guidelines. That plan should include, among other components:
 - a. Strategy for obtaining relevant guidance and approvals to support reopening for a fall semester in a residential modality.
 - b. A process for communicating our plans for the fall semester, including a timeline for a phased return to campus.
 - c. A process for communicating our plans for handling a case or an outbreak.
 - d. A process for communicating under what conditions campus will close or partially close.
 - e. A process for communicating plans for testing and contact tracing and how Syracuse University will work in concert with county public health officials.

- f. A process for communicating who will be informed of positive cases on campus and what the timeline is for informing officials. This should include details of what information specifically will be shared (affected person's name, for example).
2. The University should develop a plan to leverage relationships with associations (such as the American Council of Education and the Commission on Independent Colleges and Universities in New York State) to advance the University's tactical and strategic public policy objectives supporting a resumption of residential activities on campus in fall 2020.

11. COMMUNICATIONS & COMMUNITY COORDINATION

Findings

1. Independent of communications supporting health promotion (addressed previously), frequent, authentic and detailed communications related to the University's COVID-19 planning and preparedness—situated in public health and medical directives—will be central to resuming a residential campus and supporting social and mental well-being.
2. In Central New York, Syracuse University's impact on neighbors and local partners is significant. As the largest private employer in the region, Syracuse University must continue to communicate and work with our community partners as we take steps to resume residential campus operations.
3. Our inability to effectively communicate our planning intentions, and actions (current and planned) related to safeguarding public health, could increase risk of transmission or an outbreak of COVID-19.

Recommendations

1. Syracuse University should develop a comprehensive, campus and community information campaign focused on the University's ongoing COVID-19 planning and response. These communications should be frequent, authentic, and detailed. These communications should also be designed to maintain real-time, proactive and collaborative lines of communications with key campus and community stakeholders.
2. Syracuse University should routinely disseminate public health best practices, updates regarding COVID-related developments on campus and other issues of relevance to the broader Central New York community.
3. University communications should target audiences and campus and community stakeholders that include (but are not limited to):
 - a. On-campus students
 - b. Off-campus students
 - c. Parents/Families

- d. Student association/Graduate student organization
 - e. International students
 - f. Underrepresented student groups
 - g. Faculty
 - h. Staff
 - i. Greek life
 - j. Athletics
 - k. Neighborhood groups
 - l. Local elected officials
 - m. Local media
4. Syracuse University should develop a plan to maintain real-time, proactive, and collaborative lines of communications with key external influencers. The plan should include sharing of public health best practices, updates regarding COVID-related developments on campus and other issues of relevance to the broader Central New York community. The communications engage stakeholders, including:
- a. Neighborhood community centers and associations
 - b. Landlord associations
 - c. Local higher education partners
 - d. Crouse-Marshall businesses
 - e. Crouse Hospital/Upstate University Hospital
 - f. Local foundations
 - g. Other key community agencies
5. Syracuse University should designate spokespersons in key areas to speak with media (with oversight and support provided by Communications) and individuals to answer phone and email inquiries using standardized and evidence-informed responses.
6. Syracuse University should develop a plan for communicating about active cases as well as the death of a student, faculty, or staff member from COVID-19.
7. As the campus reopens, Syracuse University should consider hosting monthly (virtual) leadership updates or town hall meetings. These updates could occur with greater frequency (weekly or bi-weekly) as conditions warrant. A senior University leader should convene these sessions to discuss emerging topics and continue to emphasize that the health and safety of the campus community is our highest priority.

12. OTHER CONSIDERATIONS

A. SYRACUSE UNIVERSITY ATHLETICS

Findings

1. The unique activities and social, living, and travel routines associated with being a student-athlete translates to unique risk factors related to individual and community health concerns.
2. The robustness and sufficiency of the COVID-19 protocols, procedures, and preventative measure applied to the student-athlete population—given the connectedness of this population with the broader student/faculty population—will have direct implications for the entire campus community.

Recommendations

1. Syracuse University should task and charter a stand-alone working group, specifically focused on developing a COVID-19 health and emergency management plan for the athletics department.
2. That plan should include procedures and protocols designed to ensure compliance with the requirements and directives detailed in Syracuse University's broader public health plan.
3. That plan should be subject to external review by local and regional health authorities.
4. Any proposed exception to the above should require consultation with Syracuse University's medical director and ultimate approval by the director of athletics.

13. SUMMARY

This report details strategic recommendations supporting the objective of safely resuming a residential campus experience at Syracuse University. The recommendations detailed in this report are intended to be considered together, as part of an interconnected system of policies and protocols positioned to represent a whole-of-the-University approach to COVID-19 prevention, planning, and preparedness. Assuming that these recommendations can be implemented by the University as a system of policies and procedures, the Subcommittee concludes that—under deliberate, controlled and monitored conditions—it is not unreasonable for Syracuse University to pursue a reactivation of a residential campus experience for students and faculty in the fall of 2020.